EMERGENCY MEDICAL SERVICES AUTHORITY

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September 17, 2018

Mr. Brian Henricksen, EMS Administrator Napa County EMS Agency 2751 Napa Valley Corporate Drive, Building B Napa, CA 94558

Dear Mr. Henricksen:

This letter is in response to Napa County's 2017 EMS Plan Update submission to the EMS Authority on July 25, 2018.

I. Introduction and Summary:

The EMS Authority has concluded its review of Napa County's 2017 EMS Plan Update and is approving the plan as submitted.

II. History and Background:

Napa County received its last full plan approval for its 2014 plan submission, and its last annual plan update for its 2016 plan submission.

Historically, we have received EMS Plan submissions from Napa County for the following years:

- 1995
- 2011
- 2014 2016

Health and Safety Code (HSC) § 1797.254 states:

"Local EMS agencies shall **annually** (emphasis added) submit an emergency medical services plan for the EMS area to the authority, according to EMS Systems, Standards, and Guidelines established by the authority".

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The EMS Authority is responsible for the review of EMS Plans and for making a determination on the approval or disapproval of the plan, based on compliance with statute and the standards and guidelines established by the EMS Authority consistent with HSC § 1797.105(b).

III. Analysis of EMS System Components:

Following are comments related to Napa County's 2017 EMS Plan Update. Areas that indicate the plan submitted is concordant and consistent with applicable guidelines or regulations, HSC § 1797.254, and the EMS system components identified in HSC § 1797.103, are indicated below:

Appr	oved	Not Approved	
Α.	\boxtimes		System Organization and Management
В.	\boxtimes		Staffing/Training
C.	\boxtimes		Communications
D.	\boxtimes		Response/Transportation
			Ambulance Zones
			 Based on the documentation provided by Napa County, please find enclosed the EMS Authority's determination of the exclusivity of Napa County's ambulance zones.
E.	\boxtimes		Facilities/Critical Care
			Standards 5.04 and 5.13
			 The EMS Authority has noted Napa County's hard work toward the establishment and implementation of a specialty care system of care and looks forward to hearing about the end of year plan implementation.
F.	\boxtimes		Data Collection/System Evaluation
G.	\boxtimes		Public Information and Education
Н.			Disaster Medical Response

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IV. Conclusion:

Based on the information identified, Napa County's 2017 EMS Plan Update is approved.

Pursuant to HSC § 1797.105(b):

"After the applicable guidelines or regulations are established by the Authority, a local EMS agency may implement a local plan...unless the Authority determines that the plan does not effectively meet the needs of the persons served and is not consistent with the coordinating activities in the geographical area served, or that the plan is not concordant and consistent with applicable guidelines or regulations, or both the guidelines and regulations established by the Authority."

V. Next Steps:

Napa County's next annual EMS Plan Update will be due on or before September 30, 2019. If you have any questions regarding the plan review, please contact Ms. Lisa Galindo, EMS Plans Coordinator, at (916) 431-3688.

Sincerely,

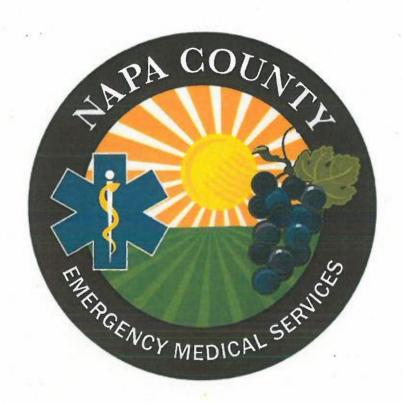
Tom McGinnis, EMT-P

Chief, EMS Systems Division

Enclosure

ZONE		Napa County	EOA 1
	Non-Exclusive		
	Exclusive		×
EXCLUSIVITY	Method to Achieve Viivizulox3		Competitive Process
1	Emergency Ambulance		a County
rype	LALS ALS		
	Yoregency Retroices		×
	9-1-1 Emergency Response		×
	7-digit Emergency Response		×
	ALS Ambulance		×
LEVEL	All CCT Ambulance services	4.	×
	ALS Non-Emergency and IFT		×
	Standby Service with soliving Support Area of the soliving the soliving the soliving the soliving soliving the soliving soliving the soliving soliving soliving the soliving s		
	eonsludmA riA IIA		
	Emergency Air Ambulance		

Napa County Emergency Medical Services Agency



EMERGENCY MEDICAL SERVICES SYSTEM PLAN

2017 Annual Report

Submitted on July 25, 2018



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EXECUTIVE SUMMARY

This plan represents the third annual update of the Napa County Emergency Medical Services (EMS) Agency Plan since receiving approval of our EMS Plan in July 2015.

The agency's primary responsibility is to plan, implement and evaluate an emergency medical services (EMS) system that meets or exceeds the minimum standards developed by the California EMS Authority (EMSA).

State law requires EMS agencies to develop plans for the delivery of emergency medical services (paramedic treatment, ambulance transport, trauma services, etc.) to the victims of sudden illness or injury within the geographic area served by the EMS agency. These plans must be consistent with state standards and address the following components:

- System organization and management.
- Staffing and training.
- Communications.
- Response and transportation.
- · Facilities and critical care.
- Data collection and evaluation.
- Public information and education (PIE).
- Disaster medical response.

It is an exciting time for the Napa EMS system and its partners. The EMS system continues to provide well-coordinated and responsive services to throughout the Napa Valley. We continue to have high performance ambulance franchise, which includes public/private partnerships to best meet the needs of patients. The EMS System includes two hospitals who are providing high levels of care to patients in both our urban and rural areas of the County. This local care includes access to ACS Verified Level III Trauma care, delivered in Napa County at Queen of the Valley Medical Center (QVMC). Both St. Helena Hospital and QVMC are designated as STEMI Receiving facilities, and the County is currently working to establish a Stroke System of Care that will begin on January 1, 2019.

Napa County completed a contract extension with our Exclusive Operating Area ambulance provider, American Medical Response, in March 2016. This contract extension will allow for the high performance ambulance transport system to continue providing services in Napa County until January 1, 2022. This new contract extension began on January 2, 2017.

The Napa County EMS System has continued to work towards meeting the minimum standards and recommended guidelines as provided in the EMS System Assessment Forms. Improvements or significant changes have been made in the following areas:

- Standard 5.04 (Specialty Care Facilities)
- Standard 5.13 (Specialty Care Design System)
- Standard 6.03 (Pre-hospital Care Audits)

In all, there are 121 Minimum Standards and Recommended Guidelines which Local EMS Agencies must address in their EMS Plans. Minimum Standards are those which should be met by each Local EMS Agency. Recommended Guidelines are those which each EMS system should strive to meet whenever possible. The Napa County EMS Agency meets all of the Minimum Standards and most of the Recommended Guidelines. However, even though the local EMS system may meet a particular Minimum Standard or Recommended Guideline, the EMS Agency recognizes that there may still be room for improvement.

This annual plan update also includes information requested by the Emergency Medical Services Authority for Alternative Receiving Facilities. St. Helena Hospital (SHH) is currently the only Alternative Receiving Facility in Napa County. The hospital, located in a rural area of Napa County, has served as a receiving facility since first

becoming a standby emergency department in 2005. More detailed information can be found in EMS System Assessment Form 5.04 and also in the attached documents (Napa County Point of Entry policy, and the Napa County Agreement with SHH to serve as a receiving facility).

TABLE 1: MINIMUM STANDARDS / RECOMMENDED GUIDELINES

A. SYSTEM ORGANIZATION AND MANAGEMENT

	A .	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Agenc	y Administration:					
1.01	LEMSA Structure		X	N/A		
1.02	LEMSA Mission		X	N/A		50
1.03	Public Input		Х	X		
1.04	Medical Director		Х	X		
Planni	ing Activities:					
1.05	System Plan		Х	N/A		
1.06	Annual Plan Update		X	N/A		
1.07	Trauma Planning*		X	Х		
1.08	ALS Planning*		X	N/A		
1.09	Inventory of Resources		X	N/A		
1.10	Special Populations		X	Х		
1.11	System Participants		Х	X		
Regul	atory Activities:					
1.12	Review & Monitoring		Х	N/A		
1.13	Coordination		X	N/A		
1.14 Manual	Policy & Procedures		X	N/A		
1.15	Compliance w/Policies		Х	N/A		
System	m Finances:		•		-	
1.16	Funding Mechanism		X	N/A		
Medic	al Direction:					
1.17	Medical Direction*		Х	N/A		
1.18	QA/QI		X	X		
1.19	Policies, Procedures, Protocols		х	x		

A. SYSTEM ORGANIZATION AND MANAGEMENT (CONTINUED)

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
1.20	DNR Policy		Х	N/A		
1.21	Determination of Death		Х	N/A		
1.22	Reporting of Abuse		Х	N/A		
1.23	Interfacility Transfer		Х	N/A		
Enha	nced Level: Advanced	Life Support				
1.24	ALS Systems		Х	X		
1.25	On-Line Medical Direction		Х	Х		
Enhan	ced Level: Trauma Care Sys	tem:				
1.26	Trauma System Plan		X	N/A		
Enhan	nced Level: Pediatric Emerge	ency Medical and Cr	itical Care Syste	em:	_	-
1.27	Pediatric System Plan		X	N/A		
Enhar	nced Level: Exclusive Opera	ting Areas:				
1.28	EOA Plan		X	X		

B. STAFFING/TRAINING

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Local	EMS Agency:					
2.01	Assessment of Needs		Х	N/A		
2.02	Approval of Training		X	N/A		
2.03	Personnel		X	N/A		
Dispa	atchers:					
2.04	Dispatch Training		X	Х		
First	Responders (non-tra	ansporting):				T
2.05	First Responder Training		X	X		
2.06	Response		X	N/A		
2.07	Medical Control		Х	N/A		
Tran	sporting Personnel:					
2.08	EMT-I Training		X	X		
Hosp	oital:	1				
2.09	CPR Training		X	N/A		
2.10	Advanced Life Support		Х	Х		
Enha	anced Level: Advan	ced Life Support	•			
2.11	Accreditation Process		Х	N/A		
2.12	Early Defibrillation		X	N/A		
2.13	Base Hospital Personnel		x	N/A		

C. COMMUNICATIONS

	* >	Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Comr	nunications Equipme	ent:				
3.01	Communication Plan*		X	Х		
3.02	Radios		X	Х	7	
3.03	Interfacility Transfer*		Х	N/A		
3.04	Dispatch Center	-	X	N/A		
3.05	Hospitals		X	X		
3.06	MCI/Disasters		X	N/A		
Publi	c Access:					
3.07	9-1-1 Planning/ Coordination		Х	х		
3.08	9-1-1 Public Education		Х	N/A		
Reso	urce Management:					
3.09	Dispatch Triage		Х	X		
3.10	Integrated Dispatch		Х	Х		

D. RESPONSE/TRANSPORTATION

		Does not currently meet standard	Meets minimum standard	Meets recommended guidelines	Short-range plan	Long-range plan
Univers	sal Level:					
4.01	Service Area Boundaries*		Х	X		
4.02	Monitoring		Х	X		
4.03	Classifying Medical Requests		X	N/A		
4.04	Prescheduled Responses	M K	х	N/A		
4.05	Response Time*		Х	X		
4.06	Staffing		Х	N/A		
4.07	First Responder Agencies		Х	N/A		
4.08	Medical & Rescue Aircraft*		Х	N/A		
4.09	Air Dispatch Center		Х	N/A		
4.10	Aircraft Availability*		Х	N/A		
4.11	Specialty Vehicles*		Х	X		
4.12	Disaster Response		Х	N/A		
4.13	Intercounty Response*		Х	Х		
4.14	Incident Command System		х	N/A		
4.15	MCI Plans		Х	N/A		
Enha	nced Level: Advance	ed Life Support:				
4.16	ALS Staffing		Х	X		
4.17	ALS Equipment		Х	N/A		
Enha	nced Level: Ambular	nce Regulation:				W
4.18	Compliance		Х	N/A		
Enha	nced Level: Exclusiv	re Operating Per	nits:			
4.19	Transportation Plan		Х	N/A		
4.20	"Grandfathering"		Х	N/A		
4.21	Compliance		Х	N/A		
4.22	Evaluation		Х	N/A		i i